

Warrant Reissue Request Form - Rev 5/2008



Send To:

Warrant Cancellation Desk 303 866-2126

State Controller's Office

633 17th Street Suite 1500

Denver Co 80202

Request Date: _____

Required Documentation

1. Completed Reissue Request Form
2. Affidavit of Lost or Stolen Warrant [Signed and Notarized] or the Original Warrant
3. Screen Prints Of COFRS WREH & WREL (All Lines)

PLEASE CANCEL & REISSUE THE FOLLOWING WARRANT:

Warrant # _____ Date of Issue _____

Amount \$ _____ Vendor Code _____

Payee Name _____
(As Appears On Warrant)

Payee's Address (If Reissued Warrant _____
Is Being Sent To The Payee) _____

REASON FOR REISSUE:

_____ Lost in mail _____ Other (EXPLAIN) _____

_____ Damaged _____ Received, Then Lost by Payee

_____ Stale Dated, Not yet Expired

AGENCY CONTACT:

Name _____

Phone _____

REISSUED WARRANT should be sent to _____ Agency _____ Payee